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DATE: December 29, 2004
TO: Examiner: Michael M. Thompson (3763)
COMPANY: U. S. Patent Office
FAX NUMBER: Centralized Fax: (703) 872-9306
FROM: Howison & Arnott, L.L.P. (David C. Cain)
OUR FILE : FMED-26,553
SERIAL NO.: 10/726,960
ATTACHED: Trans Form (1); Fee Trans (1); RCE (1); Credit Card form (1);
Amendment (6).

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PTO/S3/21 (08-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/728,980
	Filing Date	December 3, 2003
	First Named Inventor	Beckham
	Art Unit	3783
	Examiner Name	Thompson
Total Number of Pages in This Submission	Attorney Docket Number	FMED-26,553

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit Card Form; RCE;
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Howison & Arnot, LLP. David C. Cain Reg. No. 45,337
Signature	<i>David C. Cain</i>
Date	12/29/04

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Typed or printed name	David C. Cain		
Signature	<i>David C. Cain</i>	Date	12/29/04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-04v2)

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**FEE TRANSMITTAL
for FY 2005**

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$). 790.00**Complete if Known**

Application Number.	10/726,960
Filing Date	December 3, 2003
First Named Inventor	Beckham
Examiner Name	Michael Thompson
Art Unit	3763
Attorney Docket No.	FMED-26,553

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None

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Deposit Account Number: 20-0780/FMED-26,553

Deposit Account Name: HOWISON & ARNOTT, L.L.P.

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FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 790	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 550	2003 275	Plant filing fee	
1004 790	2004 395	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) (\$).**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims: -20** = X =

Independent Claims: -3** = X =

Multiple Dependent: =

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 68	2201 44	Independent claims in excess of 3	
1203 300	2203 150	Multiple dependent claim, if not paid	
1204 68	2204 44	** Reissue independent claims over original patent	
1205 16	2205 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$).

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 430	2252 215	Extension for reply within second month	
1253 980	2253 490	Extension for reply within third month	
1254 1,530	2254 765	Extension for reply within fourth month	
1255 2,080	2255 1,040	Extension for reply within fifth month	
1401 340	2401 170	Notice of Appeal	
1402 340	2402 170	Filing a brief in support of an appeal	
1403 300	2403 150	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,370	2453 685	Petition to revive - unintentional	
1501 1,370	2501 685	Utility issue fee (or reissue)	
1502 490	2502 245	Design issue fee	
1503 660	2503 330	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180	Submission of Information Disclosure Sheet	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))	
1801 790	2801 395	Request for Continued Examination (RCE)	790.00
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$). 790.00**SUBMITTED BY**

Name (Print/Type)	David C. Cain	Registration No. (Attorney/Agent)	45,337	Telephone	972-680-8057
Signature	<i>David C. Cain</i>	Date	12/29/04		

(Complete if applicable)

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Jim Beckham
Serial No.: 10/726,960
Filed: December 3, 2003
Group: 3763
Examiner: Michael Thompson
For: MEDICAL BALLOON

Commissioner for Patents
P.O. Box 1450
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David C. Cain

(Name of Person Mailing Document)

David C. Cain

(Signature)

12/29/04

(Date of Signature)

AMENDMENT AFTER FINAL REJECTION

In response to the Office Action dated October 5, 2004, please amend the above-referenced patent application as follows:

Amendments to the Claims are reflected in the listing of claims beginning on page 2 of this paper.

Remarks/Arguments being on page 5 of this paper.

AMENDMENT AND RESPONSE
S/N 10/726,960
Atty. Dkt. No. FMED-26,553

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